

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	94		5/30/00
O.I.P.E. CLASSIFIER	1A	1015	
FORMALITY REVIEW	71622	11-11-00	
RESPONSE FORMALITY REVIEW	71622	11-28-00	

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral).... Canceled A Appeal
 ÷ Restricted O Objected

Claim	N	Date
Final		
Original		
1	✓	5/20/00
2	✓	5/20/00
3	✓	5/20/00
4	✓	5/20/00
5	✓	5/20/00
6	✓	5/20/00
7	✓	5/20/00
8	✓	5/20/00
9	✓	5/20/00
10	✓	5/20/00
11		
12	✓	5/20/00
13	✓	5/20/00
14	✓	5/20/00
15	✓	5/20/00
16	✓	5/20/00
17	✓	5/20/00
18	✓	5/20/00
19	✓	5/20/00
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
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